

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 88

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Alan Mollohan for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) James E. Brown Mailing Address RR 1 Box 463 City Grafton State WV Zip Code 26354-9774 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer G. A. Brown and Sons Occupation President Receipt For: 2008 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 4600.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 8 / 2 0 0 7 <b>Transaction ID: C4452644</b> Amount of Each Receipt this Period 2300.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Charles Buchanan Mailing Address 10708 Howerton Ave City Fairfax State VA Zip Code 22030-2917 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer EWA Occupation Director Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 8 / 2 0 0 7 <b>Transaction ID: C4454813</b> Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Carmine Cann Mailing Address 771 W Shannon Rd City Bridgeport State WV Zip Code 26330-1155 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Carmine Cann, Esq. Occupation Attorney at Law Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 1 / 2 0 0 7 <b>Transaction ID: C4443847</b> Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....**3800.00****TOTAL** This Period (last page this line number only) .....